

*Handwritten signature/initials*

PTO/SB/17 (12-04)

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Effective on 12/08/2004.  
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

# FEE TRANSMITTAL

## For FY 2005

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)

### Complete if Known

Application Number	10/817,653
Filing Date	4/2/2004
First Named Inventor	Gao et al.
Examiner Name	Kevin M. Bernatz
Art Unit	1773
Attorney Docket No.	109004.0032

### METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_

☒ Deposit Account Deposit Account Number: 50-0959 Deposit Account Name: Roetzel & Address

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☐ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☐ Credit any overpayments

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### FEE CALCULATION

#### 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

#### 2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
21	- 20 or HP = 1	x 50	= 50			
HP = highest number of total claims paid for, if greater than 20						
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)			
2	- 3 or HP = 0	x 200	= 0			
HP = highest number of independent claims paid for, if greater than 3						

#### 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$)

\_\_\_\_\_ - 100 = \_\_\_\_\_ / 50 = \_\_\_\_\_ (round up to a whole number) x \_\_\_\_\_ = \_\_\_\_\_ Fee Paid (\$)

#### 4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: \_\_\_\_\_

Fees Paid (\$)

#### SUBMITTED BY

Signature	<i>Joseph J. Crivelli</i>	Registration No. (Attorney/Agent)	41,690	Telephone	330-849-6676
Name (Print/Type)	Joseph J. Crivelli	Date	5/16/05		

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In the application of )

Gao et al. )

Serial No 10/817,653 )

Filed April 2, 2004 )

For UV/EB CURED INTEGRATED  
MAGNETS-COMPOSITION AND  
METHOD OF FABRICATION )


Group Art Unit 1773

Examiner Kevin M. Bernatz

Confirmation No. 6519

**CERTIFICATE OF MAILING**

I hereby certify that this correspondence was deposited with the United States Postal Service as First Class Mail addressed to: Mail Stop AMENDMENT, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on May 16, 2005.

  
Joseph J. Crimaldi

**TRANSMITTAL SHEET**

Enclosed are the following documents:

Response to Office Action dated 2/14/05 (*with certificate of mailing*)

Request for Extension of Time

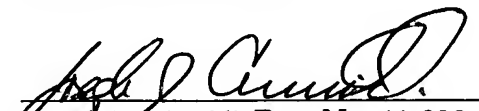
Fee Transmittal

Return Receipt Postcard

**AUTHORIZATION TO CHARGE DEPOSIT ACCOUNT**

The Director is hereby authorized to charge payment of any fees associated with this communication or credit any overpayment to Deposit Account No. 50-0959. Please refer to Reference No. 109004.0032 when charging our deposit account.

Respectfully submitted,

  
Joseph J. Crimaldi, Reg. No. 41,690  
George W. Moxon II, Reg. No. 26,615  
Roetzel & Andress  
222 South Main Street  
Akron, Ohio 44308  
Telephone: (330) 376-2700  
Facsimile: (330) 376-4577  
E-mail: gmoxon@ralaw.com  
Attorney for Applicant(s)

May 16, 2005  
1263495.1.109004.0032

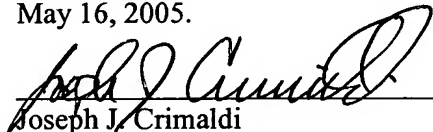
Application No.: 10/817,653  
Amendment dated: May 16, 2005  
Reply to Office Action of February 14, 2005



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In the application of ) Group Art Unit 1773  
) Confirmation No. 3398  
GAO et al. ) Examiner Kevin M. Bernatz  
)

**CERTIFICATE OF MAILING**

Serial No 10/817,653 )  
)  
Filed April 2, 2004 ) I, Joseph J. Crimaldi, hereby certify that this  
) correspondence was deposited with the United  
) States Postal Service as First Class Mail  
) addressed to: Commissioner for Patents, P. O.  
For UV/EB CURED INTEGRATED ) Box 1450, Alexandria, VA 22313-1450, on  
MAGNETS-COMPOSITION AND ) May 16, 2005.  
METHOD OF FABRICATION )   
Joseph J. Crimaldi

**RESPONSE TO OFFICE ACTION DATED 2/14/05**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

In response to the Office Action dated February 14, 2005, for which a one month period of response was given. Enclosed herewith is a Petition and fee for a two (2) month extension of time. Since May 14, 2005 was a Saturday, this reply is timely filed on Monday, May 15, 2005 with a two month extension of time. Should any additional extension of time be necessary, petition is hereby made for such an extension. In light of the above, the Commissioner is hereby authorized to charge Deposit Account No. 50-0959, Matter No. 109004.0032, for any fees due in connection with the filing of this Reply/Amendment.

**Amendments to the Claims** are reflected in the listing of the claims, which begins on page 2 of this paper.

**Remarks/Arguments** begin on page 5 of this paper.